

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 335711	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/18/2025
NAME OF PROVIDER OR SUPPLIER Slate Valley Center for Rehabilitation and Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 10421 State Route 40 Granville, NY 12832	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48413</p> <p>Based on observation, record review, and interview conducted during the recertification survey, the facility did not ensure the provision of sufficient nursing staff to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident throughout the facility. Specifically, residents reported during interviews that the facility was short-staffed at times, which resulted in call bells not being answered in a timely manner with long wait times for care to be provided. An analysis of the actual staffing schedule showed that on 10 occasions from 2/15/2025 to 4/13/2025, the facility did not meet their facility assessment for staffing needs.</p> <p>This is evidenced by:</p> <p>Upon entrance to the facility on [DATE] at approximately 10:00 AM, 86 residents resided in two (2) units. Upon observing and reviewing the Facility Staffing Sheet, nine (9) Licensed Nurses and ten (10) Certified Nurse Aides were on duty.</p> <p>The Facility Assessment, last reviewed on 10/07/2024, documented that the facility's bed capacity was 88. The section titled, Staffing Plan, documented the following:</p> <ul style="list-style-type: none"> - Day shift required three (3) Registered Nurses, four (4) Licensed Practical Nurses, and 12 Certified Nurse Aides - Evening shift required two (2) Registered Nurses, four (4) Licensed Practical Nurses, and 12 Certified Nurse Aides - Night shift required one (1) Registered Nurse, two (2) Licensed Practical Nurses, and four (4) Certified Nurse Aides - A complete census would require the facility to provide 215.6 hours of direct Certified Nurse Aide care for all residents on that day. <p>A review of staffing sheets provided by the facility from 2/15/2025 through 4/13/2025 documented that they did not meet their assessed minimum staffing on most day and evening shifts, for the following:</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<ul style="list-style-type: none"> - On 2/15/2025, the facility census was 83 residents, which required 203.35 hours of direct Certified Nurse Aide care. The facility schedule had 152 hours of direct Certified Nurse Aide care. - On 2/16/2025, the facility census was 83 residents, which required 203.35 hours of direct Certified Nurse Aide care. The facility schedule had 160 hours of direct Certified Nurse Aide care. - On 2/26/2025, the facility census was 87 residents, which required 213.15 hours of direct Certified Nurse Aide care. The facility schedule had 144 hours of direct Certified Nurse Aide care. - On 3/07/2025, the facility census was 88 residents, which required 215.6 hours of direct Certified Nurse Aide care. The facility schedule had 152 hours of direct Certified Nurse Aide care. - On 3/11/2025, the facility census was 88 residents, which required 215.6 hours of direct Certified Nurse Aide care. The facility schedule had 136 hours of direct Certified Nurse Aide care. - On 3/17/2025, the facility census was 88 residents, which required 215.6 hours of direct Certified Nurse Aide care. The facility schedule had 152 hours of direct Certified Nurse Aide care. - On 3/26/2025, the facility census was 85 residents, which required 208.25 hours of direct Certified Nurse Aide care. The facility schedule had 152 hours of direct Certified Nurse Aide care. - On 4/1/2025, the facility census was 85 residents, which required 208.25 hours of direct Certified Nurse Aide care. The facility schedule had 160 hours of direct Certified Nurse Aide care. - On 4/07/2025, the facility census was 84 residents, which required 205.8 hours of direct Certified Nurse Aide care. The facility schedule had 144 hours of direct Certified Nurse Aide care. - On 4/11/2025, the facility census was 83 residents, which required 203.35 hours of direct Certified Nurse Aide care. The facility schedule had 120 hours of direct Certified Nurse Aide care. <p>During a surveyor-led group resident meeting on 4/15/2025 at 10:30 AM, the 7 residents attending the meeting reported insufficient staffing to meet their needs. They often had to wait an extended period of time to get care. They stated staffing was extremely low on weekends when only one (1) or two (2) aides per unit.</p> <p>During an interview on 4/18/2024 at 10:45 AM, Staffing Coordinator #1 stated that a program created the daily schedule via a spreadsheet, created by corporate, that allocated the number of staff personnel per the daily census. They stated that the program does not change, and all they are required to do is input the daily census, and the program would provide the number of Certified Nurse Aides and nursing personnel required.</p> <p>51317</p> <p>(continued on next page)</p>		

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 4/18/2025 at 10:45 AM, Director of Nursing #1 stated that they were aware of the federal regulation regarding required hours for Certified Nurse Aides per the census. They stated that the schedule was done by a program created by corporate to determine the number of staff they would require per the daily census. They stated that according to a complete census of 88 residents, the facility was budgeted for six (6) Certified Nurse Aides during the day, six (6) Certified Nurse Aides for the evening, and four (4) Certified Nurse Aides for the night shift. They stated that the staffing would be adjusted when there are call-ins, and they made every attempt to fill in with additional staff. They stated that the pool for additional staffing was relatively small due to their remote location.</p> <p>10 New York Code Rules and Regulations 415.13(a)(1)(i-iii)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>48413</p> <p>Based on observation, record review, and interview conducted during the recertification survey, the facility did not store, prepare, distribute, and serve food in accordance with professional standards for food service safety in the main kitchen and two (2) of the two (2) resident unit nourishment rooms. Specifically, in the main kitchen, the dishwashing machine temperature display panel and floors under the dishwashing machine were soiled with food particles or dirt; the storage area for clean pots, pans, and food containers had multiple containers stacked together that were not thoroughly dried and contained moisture. In the A-Unit nourishment room, the refrigerator door gaskets were soiled with food particles, and in the B-Unit nourishment room, the refrigerator and floor were soiled with food particles or dirt.</p> <p>This is evidenced by:</p> <p>The following items were noted during observations on 4/17/2025 at 11:15 AM in the main kitchen and unit nourishment rooms.</p> <p>In the main kitchen, the dishwashing machine temperature display panel and floors under the dishwashing machine were soiled with food particles or dirt; the storage area for clean pots, pans, and food containers had multiple containers stacked together that were not thoroughly dried and contained moisture. The refrigerator door gaskets in the A-Unit nourishment room and the floor in the B-Unit nourishment room were soiled with food particles or dirt.</p> <p>During interviews on 04/17/2025 at 1:23 PM, Food Service Director #1 stated that it is a joint effort between nursing staff on the unit and the kitchen staff to keep the areas clean. They indicated they had placed a cleaning schedule and checklist for the unit's nourishment areas. They stated they did not have the gasket area on the checklist and would need to add it. They stated that the staff will need to be more diligent in placing the pots and pans away to make sure they are completely dry before doing so. They stated that the dishwasher was not getting to the proper temperature for sanitizing and had to be repaired. They stated that the maintenance director had repaired the dishwasher but needed to clean the area after they had finished. They stated that staff would clean the area and instructed the staff to make sure the dishwasher area was clean after each use.</p> <p>10 New York Code of Rules and Regulations 415.14(h)</p>		